



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention – Consumer Programs  
**Municipal Sustainability Grant Application – FY 2009**  
For Equipment, Outreach & Technical Assistance

**Important:**

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



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**A. Applicant Information**

1. Municipality, Regional Group

2. Address Line 1

3. Address Line 2

4. City/Town

5. State

6. Zip Code

7. Recycling Contact Name

8. Title

9. Telephone Number (555) 555-5555

10. Fax Number (555) 555-5555

11. E-mail Address

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**B. Items Requested**

1. Select the grant item(s) you are requesting.

**Note:** All municipalities must have a Buy Recycled Policy and a CY2007 Recycling Data Sheet on file or submit one by the grant deadline in order to be eligible to receive a grant.

- a. ☐ Public Area Recycling Containers
- b. ☐ Consumer Education and Outreach Materials
- c. ☐ Pay-As-You-Throw Assistance
- d. ☐ Home Composting Bins / Kitchen Scrap Buckets
- e. ☐ Rain Barrels and Water Conservation Tools
- f. ☐ School Chemical Management/Cleanout
- g. ☐ Mercury / Universal Waste Sheds
- h. ☐ Idling Reduction Campaign Toolkit
- i. ☐ Diesel Vehicle Retrofit Equipment and Diesel Hybrid Trucks
- j. ☐ Mandatory Recycling Enforcement Coordinator
- k. ☐ Technical Assistance – In-Kind
- l. ☐ Technical Assistance – Municipal Sustainability Initiatives

**Return completed applications to:**

Tina Klein, MassDEP, Consumer Programs, 6<sup>th</sup> Floor, 1 Winter Street, Boston, MA 02108

**Note:** Applications must be received at the address above by September 11, 2008 at 5:00 p.m.  
Applications will not be accepted if they are faxed or emailed.



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Public Area Recycling Container Request**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

## A. Introduction

MassDEP is offering three types of public space recycling containers for the collection of bottles and cans in outdoor public areas (e.g. parks, athletic fields) and one type of container for collecting cans, bottles and paper at indoor or outdoor special events. Please Note: If you are requesting containers from both categories (B & C), please identify your First Choice category and Second Choice category.

### Important:

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For more information about grant item, please call Sean Sylver at 617-292-5747

## B. Outdoor/Permanent Containers

☐ First Choice

☐ Second Choice



1. Original Canables® are made for semi-permanent collection purposes such as seasonal public parks, recreational fields, and beaches. They are also suitable for certain indoor venues such as conference centers and sporting facilities. The containers are made of tough, galvanized steel for durability and fire resistance.

a. Quantity Requested: \_\_\_\_\_

Number

b. Type of Use:

☐ Public Parks

☐ Recreational Fields

☐ Beaches



2. MassCor public area recycling baskets are designed for outdoor, permanent or semi-permanent uses such as parks and recreation areas and are powder coated wire mesh steel containers measuring 18" x 18" x 36".

a. Quantity Requested: \_\_\_\_\_

Number

b. Type of Use:

☐ Public Parks

☐ Recreational Fields

☐ Beaches



3. Clusters® models are ideal for use in permanent downtown or "main street" locations. They are constructed of wood-like slats made of 100% post-consumer recycled plastic. The framework is cast of post-industrial aluminum and stainless steel fasteners and is available with 1, 2 and 3 containers per Cluster®.

a. Quantity Requested: \_\_\_\_\_

Number

b. Type of Use:

☐ Downtown/Main Street Recycling

☐ High Traffic/Visibility Recreational Areas  
(e.g. boardwalks, tourist destinations)

c. Describe Location(s): \_\_\_\_\_

## C. Indoor/Event Containers

☐ First Choice

☐ Second Choice



1. Clear Canables® are perfect for collecting recyclables at community events, indoor or outdoor festivals, and other short-term uses. Made of 100% recycled PET plastic, the walls and lids show the public how much is being recycled. Clear Canables® also address a concern for security issues since the clear walls make it more difficult to hide items inside.

a. Quantity Requested: \_\_\_\_\_

Number

b. Event Details (Name, Duration, Attendance, Frequency): \_\_\_\_\_



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Public Area Recycling Container Request**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**D. Additional Information**

5. Do you currently operate a public area recycling program?

☐ a. Yes      ☐ b. No

6. Describe how the recycling containers will be emptied (e.g. municipal staff, other) and where the materials will be transported for recycling:

a. Outdoor/Permanent Containers:

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b. Indoor/Event Containers:

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7. Have funds been allocated to cover the cost of collecting the recyclables?

☐ a. Yes      ☐ b. No      ☐ c. Funds Not Needed



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Consumer Education & Outreach Materials Request**  
Municipal Sustainability Grant Application - FY 2009

\_\_\_\_\_  
Name of Municipality

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



For more information about this grant item, please call Regan Clover at 617-292-5707

## A. Customized Recycling Education Post Card

This grant provides for the production and mailing of a recycling education post card designed to promote participation in municipal curbside recycling or drop-off recycling programs. Grantees will provide specific recycling program information to MassDEP's design/printing vendor to prepare a 5½" x 8½" post card, using a pre-determined template. MassDEP's vendor will mail the post card directly to all households in your community. All post cards will be mailed no later than June 30, 2009. A sample post card can be found in the Grant Instructions.

1. Check if Requesting This Item ☐

2. Number of Households in Municipality: \_\_\_\_\_

Number

3. Does your municipality either operate or contract for the operation of its residential recycling program?

☐ a. Yes

☐ b. No

## B. Standardized Consumer Education Materials

MassDEP does *not* direct mail these items to residents; your municipality will be responsible for distribution (through condo associations, town halls, libraries, as inserts in tax bills, at schools, recycling/transfer stations, etc.).

1. Check item(s) requested:

Quantities requested:

☐ a. Multi-Family Recycling Door Hangers:

# English

# Bilingual (English & Spanish)

# Springfield MRF English

# Springfield MRF Bilingual

☐ b. Composting Brochures:

# Don't Trash Grass

# Home Composting

☐ c. Waste Reduction Bookmarks:

# Bookmarks\*

\*Maximum request for these items is 10% of total municipal households.

☐ d. Junk Mail Reduction Kits:

# Kits\*

2. Describe how you will distribute these items:

3. Shipping address, *if different from your primary address*. Please Note: We cannot deliver materials to a P.O. box.

a. Contact Name

b. Email Address

c. Street Address

d. City/Town

e. State

f. Zip Code

## C. Waste Reduction Toolkit

Check if Requesting This Item ☐

The Waste Reduction Toolkit has five "modules" - *Working with the Media; Using Mandatory Recycling to Reduce Disposal Costs; Hosting Community Reuse Events; Promoting Recycling to Local Businesses; and Zero Waste Events* - each addressing a different strategy and containing a step-by-step timeline, press releases, case studies, and templates for outreach materials that can be modified to suit community needs. All materials are provided in electronic format on a CD. You may also choose from three printed publicity tools: "Recycling Matters" palm cards; "Mandatory Recycling" door hangers; or laminated wall signs for office, school and business recycling programs.



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Pay-As-You-Throw Assistance**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

## A. Introduction

In a Pay-As-You-Throw (PAYT) solid waste program, residents purchase preprinted stickers or bags for disposal of trash, thereby paying directly for the amount of solid waste that they generate. There is no direct fee for recycling. MassDEP offers two types of PAYT assistance to communities (1) Technical assistance for PAYT planning, and (2) Start-up funds for new program implementation. Please complete the program information below (Section B) and indicate the type of assistance you are requesting (Section C). **Municipalities may apply for one or both types of assistance.**

**Important:**  
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For more information about this grant item, please call Joseph Lambert at 617-574-6875

## B. Program Information

1. How many households will your new PAYT program serve? \_\_\_\_\_  
Number of Households
2. Estimated start date for PAYT program: \_\_\_\_\_  
Date (MM/DD/YYYY)
3. Recycling collection frequency: ☐ a. Weekly ☐ b. Bi-Monthly ☐ c. Other (Explain Below)  
\_\_\_\_\_
4. How is your municipal trash currently collected? ☐ a. Drop-off ☐ b. Curbside
5. How is your municipal recycling currently collected? ☐ a. Drop-off ☐ b. Curbside
6. Indicate below what steps your community has taken or needs to take in order to implement a PAYT program:
  - a. Program has been approved by the appropriate decision making body (e.g. Board of Health, Board of Selectmen, Mayor/Council, Town Meeting):  
☐ Yes ☐ No – Provide Target Completion Date: \_\_\_\_\_  
Date (MM/DD/YYYY)
  - b. Operating budget has been approved:  
☐ Yes ☐ No – Provide Target Completion Date: \_\_\_\_\_  
Date (MM/DD/YYYY)
  - c. PAYT Implementation plan / timeline has been completed:  
☐ Yes ☐ No – Provide Target Completion Date: \_\_\_\_\_  
Date (MM/DD/YYYY)

## C. Assistance Request

**Technical Assistance:** Receive up to 80 hours of technical assistance from a MassDEP Municipal Assistance Coordinator to help your municipality explore the potential for a PAYT program or implement a planned program.

- ☐ 1. Check here if you are requesting Technical Assistance.

Below, indicate the type(s) of assistance needed (check all that apply):

- ☐ a. PAYT cost/benefit analysis. ☐ b. Educational presentations for public meetings.  
☐ c. Development of educational materials for program implementation. ☐ d. Other – Describe Below:  
\_\_\_\_\_  
\_\_\_\_\_



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Pay-As-You-Throw Assistance**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**C. Assistance Request** (continued)

**Start-Up Funds:** Receive up to \$4.00 per participating household served by the municipal solid waste program for a PAYT program that will be implemented between July 1, 2008, and July 1, 2009. Grant funds may be used for initial bag or sticker purchases and other start-up costs. Grant funds may be dispersed over a two-year period.

☐ 2. Check here if you are requesting Start-Up Funds.

- ☐ a. I understand that in order to be eligible for PAYT start-up funds, the municipality must meet the following criteria:
- Operate the PAYT program for at least two (2) years.
  - Set a fee structure that insures: (1) fixed solid waste collection costs will be substantially covered through the tax base or another funding source, and (2) variable costs will be placed on the bags or stickers.
  - Provide no more than one free bag, sticker or container per household per week, with container volume not exceeding 36 gallons.
  - Adopt an ordinance or establish permit conditions requiring private subscription haulers to provide bundled solid waste and recycling services to their customers (i.e., all customers receive recycling collection with trash collection.)



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Home Composting Bins & Kitchen Scrap Buckets**  
Municipal Sustainability Grant Application - FY 2009

Municipality \_\_\_\_\_

## A. Request Information

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Indicate the type and number requested (20 minimum/500 maximum per municipality):

a. 11 Cubic Feet New Age Composter \_\_\_\_\_

Quantity

d. 11 Cubic Feet Earth Machine \_\_\_\_\_

Quantity

b. 24 Cubic Feet New Age Composter \_\_\_\_\_

Quantity

e. Kitchen Scrap Buckets \_\_\_\_\_

Quantity

c. 30 Cubic Feet New Age Composter \_\_\_\_\_

Quantity

2. Who will coordinate the program (i.e. take orders, answer questions, reorder bins)?

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

3. Request for: ☐ a. Existing Program – Complete Section B. ☐ b. New Program – Skip to Section C.

## B. Existing Program Information Only

1. Indicate the number of bins currently on hand:

\_\_\_\_\_  
Quantity

2. Amount of funds remaining in your dedicated compost bin account:

\_\_\_\_\_  
Funds Remaining

3. Total number of bins you have distributed in the program to date:

\_\_\_\_\_  
Total Bins Distributed

## C. New Program Information Only

1. Indicate the prices(s) to be charged for applicable bins:

\_\_\_\_\_  
a. 11 cubic feet New Age Composter Price

\_\_\_\_\_  
b. 24 cubic feet New Age Composter Price

\_\_\_\_\_  
c. 30 cubic feet New Age Composter Price

\_\_\_\_\_  
d. 11 cubic feet Earth Machine Price

2. Where will bins be distributed (e.g., Town Hall, DPW, etc.)?

\_\_\_\_\_  
\_\_\_\_\_

3. Does your municipality have a dedicated account or gift account?  
(required for bin sales/reordering)

☐ a. Yes

☐ b. No

If no, do you have the necessary approval to set up a dedicated or gift account? (Note: This may require town meeting approval.)

☐ c. Yes

☐ d. No

4. How will your municipality promote its home composting education program?

☐ a. Media Promotion

☐ b. Brochure Distribution

☐ c. School Composting Program

☐ d. Bin Demonstration Areas

☐ e. Other:

\_\_\_\_\_  
Specify



**New Age  
Composter**



**The Earth  
Machine**



**Kitchen Scrap  
Bucket**

For more information about these grant items, please call Ann McGovern at 617-292-5834



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Rain Barrels & Water Conservation Tools**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

## A. Introduction

For more information about these items, please call Ann McGovern at 617-292-5834

MassDEP is offering grants to promote conservation of water at homes: discounted rain barrels and home water conservation kits. These tools can help residents reduce demand on municipal water supplies and protect the local water table. Diverting rainwater from storm sewers also helps prevent erosion and reduces contamination of rivers and lakes.

**Rain barrels** are 100% recycled 55-gallon barrels that connect to a gutter's downspout. They have an overflow valve and a spigot for attaching a hose or filling containers for hand watering. If your community is awarded this grant, MassDEP will provide a \$10 discount for each rain barrel purchased by residents. Residents pay for the rain barrels in advance and pick them up at a one-day distribution event hosted by the municipality. MassDEP will pay the rain barrel vendor \$10 for each unit sold, up to a specified quantity.

**Water conservation kits**, designed to help residents make their homes "water tight and waste free," include:

**Indoor water conservation devices:**

- Chrome, low-flow showerheads with massage setting
- Dye tablets to check for toilet leaks
- Swivel faucet aerators for the kitchen

**Outdoor water conservation devices:**

- Rain gauges
- Handheld outdoor hose nozzles

MassDEP suggests that municipalities allow residents to choose which device(s) they are interested in, as opposed to distributing one of each item as a "kit".

**Please note:** All grantees must agree to publicize the availability of rain barrels and water conservation kits and conduct a follow-up survey of at least 10% of the recipients to track their installation and usage.

**Important:** When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



## B. Request Information

1. **Rain Barrels:** Number of rain barrel discounts requested (select only one barrel model):



a. Sky Juice Rain Barrel:

\_\_\_\_\_  
Quantity



b. New England Rain Barrel:

\_\_\_\_\_  
Quantity

2. Has your municipality previously distributed rain barrels?

☐ a. Yes – Describe below.

☐ b. No

3. **Rain Barrel Discounts:** Can your municipality provide staff for the distribution events? (Note: Municipalities will select date of event in conjunction with barrel vendor's schedule. Distribution events may occur on a weekend and must occur before 6/1/09.)

☐ a. Yes

☐ b. No

4. **Water Conservation Kits:** Indicate the number of water conservation kits you would like to receive (ex: 50 "kits" equals 50 of each device.)

\_\_\_\_\_  
Quantity

Note: Number requested should not exceed the equivalent of 5% of the number of households in your municipality.





**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Rain Barrels & Water Conservation Tools**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**B. Request Information** (continued)

5. Has your municipality previously distributed water conservation kits?

☐ a. Yes – Describe below.

☐ b. No

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6. What is the source of your municipal water supply? Please note that MWRA communities may be eligible for free kits through an MWRA program and may only receive outdoor kits through this grant.

\_\_\_\_\_  
Source (e.g., Reservoir, Well, MWRA, etc.)

7. How will your municipality publicize the availability of these items?

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8. Describe any conditions or circumstances in your community that would support the implementation of a rain barrel and/or water conservation kits initiative:

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9. Identify the municipal employee who will coordinate the distribution of rain barrels and/or water conservation kits, if different from contact information on Page 1:

\_\_\_\_\_  
a. Name

\_\_\_\_\_  
b. Title

\_\_\_\_\_  
c. Address

\_\_\_\_\_  
d. Phone Number (555) 555-5555

\_\_\_\_\_  
e. Email



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**School Chemical Management/Cleanout Request**  
Municipal Sustainability Grant Application - FY 2009

\_\_\_\_\_  
Name of Municipality

## A. Introduction

For more information about this grant item, please contact Tina Klein at 617-292-5704.

MassDEP is offering grants for creating sustainable chemical management systems in public schools and clearing out stockpiled chemicals. The goals of this program are to reduce the purchasing of unnecessary chemicals, safely manage the chemicals necessary for classroom instruction and management of the physical plant, and prevent future stockpiling. Schools selected for this grant will receive up to 90 hours of professional hazardous waste management services to perform a chemical inventory, training on chemical hazard awareness, how to establish and implement a chemical management plan, and **up to \$5,000** per school in clean-out expenses for unnecessary chemicals.

**Who is Eligible:** Individual middle or high schools are eligible for this grant. Municipalities must submit applications on behalf of their schools.

Schools selected for this grant must commit to:

- Establishing an environmental health and safety team to implement the project
- Developing and implementing a chemical management plan
- Completing an annual chemical storage and safety check by the local Fire Department
- Sending a minimum of three officials to a half day training on school chemical management
- Submitting a summary report to MassDEP on the actions taken to implement the school's chemical management plan

### Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



### Required Letters of Support:

Applicants must provide letters of support from the Municipal Chief Executive (i.e. Mayor or Board of Selectmen), Fire Department, and School Principal or Superintendent. Applications received without these letters will be considered incomplete.

## B. School Information

### 1. School name and student population:

\_\_\_\_\_  
a. Name of School

\_\_\_\_\_  
b. Number of Students

### 2. Has this school taken any actions to reduce the purchase or use of hazardous chemicals? (e.g. micro or small-scale lab curriculum, chemical purchasing policy)

☐ a. Yes – Please describe below.

☐ b. No

\_\_\_\_\_  
c. Description

### 3. Has this school performed a chemical cleanout in the past?

☐ a. Yes – Describe and provide dates below.

☐ b. No

\_\_\_\_\_  
c. Description

### 4. Does this school have an existing environmental health and safety coordinator or team?

☐ a. Yes - Describe activities to date below.

☐ b. No

\_\_\_\_\_  
c. Description

### 5. School contact person who will serve as liaison if grant is awarded:

\_\_\_\_\_  
a. Name

\_\_\_\_\_  
b. Title

\_\_\_\_\_  
c. Phone

\_\_\_\_\_  
d. Email



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Mercury / Universal Waste Sheds**  
Municipal Sustainability Grant Application - FY 2009

\_\_\_\_\_  
Name of Municipality

For more information about this grant item, please contact Regan Clover at 617-292-5707.

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



**Note:** Requests for mercury sheds from smaller communities (population less than 5,000) will be more favorably ranked if the program will serve multiple communities.

## A. Introduction

Signed into law in July 2006, the Massachusetts Mercury Management Act is designed to keep mercury out of our trash and wastewater, where it is released into the environment. MassDEP is working to expand the number of locations where residents and small businesses may recycle their mercury-containing products. This grant provides wooden sheds suitable for establishing new mercury collection sites at municipal public works yards or highway departments. Grantees will receive *one* 8'x10' wooden shed for collecting mercury/universal wastes such as fluorescent lamps, certain batteries, and other mercury-containing devices (e.g., thermostats, thermometers, mercury switches and flow meters). A half-day training for municipal staff on proper mercury collection and management practices is also included in the grant. The grant does *not* pay for the operating costs/staffing of the shed, and municipalities will be responsible for the costs of recycling the materials collected.

## B. Request Information

1. Municipal employee who will coordinate your mercury/universal waste collection program:

\_\_\_\_\_  
a. Name

\_\_\_\_\_  
b. Title

2. Where will the mercury shed be located?

\_\_\_\_\_  
a. Description (e.g. DPW Yard)

\_\_\_\_\_  
b. Street Address

\_\_\_\_\_  
c. City/Town

\_\_\_\_\_  
d. ZIP Code

3. Does your municipality have FY09 funds available to pay for recycling of mercury-containing items?

☐ a. Yes ☐ b. No

4. Does your municipality plan on charging a fee to residents and/or small businesses?

☐ a. Yes ☐ b. No

\$ \_\_\_\_\_  
c. If Yes, Amount of Fee

5. Will the site/shed be attended or in the line of sight of an attendant?

☐ a. Yes ☐ b. No

6. How often will the mercury shed be open for collection?

☐ a. Monthly ☐ b. Bi-Monthly ☐ c. Weekly ☐ d. Daily

7. If shed is awarded, will residents from neighboring municipalities be permitted to use it?  
(You may want to consider a fee system for certain materials.)

☐ a. Yes ☐ b. No

\_\_\_\_\_  
c. If Yes, List Other Communities to be Served

8. If shed is awarded, will small businesses be permitted to utilize your mercury shed?

☐ a. Yes ☐ b. No

9. If shed is awarded, how will your community promote its availability?

10. Does your community have a long-term disposal contract with a Municipal Waste Combustor ?

☐ a. Yes ☐ b. No

\_\_\_\_\_  
c. If Yes, Name of Municipal Waste Combustor

\_\_\_\_\_  
d. Contract End Date (MM/DD/YYYY)



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Idling Reduction Campaign Toolkit**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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## A. Introduction

For more information about this grant item, please contact Stefan Malner at 617-348-4004

While there are many sources of air pollution, at least 40 percent of smog-forming pollutants come from cars, buses and trucks. These pollutants lead to environmental degradation and negatively affect human health. Emissions from diesel vehicles contain fine particles that can be inhaled deeply into the lungs. Exhaust from idling vehicles accumulates in and around schoolyards and buildings and can enter buildings through air-intake vents and open doors. Unnecessary idling also wastes fuel and money. A simple way to cut down on air pollution from motor vehicles is to eliminate unnecessary idling by turning off the engine when parking or waiting.

Communities interested in reducing the impacts of vehicle idling should apply for this grant. Grantees will receive: idling reduction signs for posting in public spaces (schools, transfer stations, mass transit pick-up/drop-off areas), sample press releases, fact sheets, palm cards, bumper stickers, windshield decals and other materials to implement a school or community-wide idling reduction campaign.

**Note: All grantees are required to participate in a half-day information and training session.**

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



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## B. Request Information

1. Please identify, by name and title, the municipal employee who will coordinate your idling reduction campaign (if different from contact information on page 1):

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

2. Describe any existing efforts in your community that would either support or be complemented by this activity:

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3. Please identify any partner organizations and/or inter-departmental initiatives that would be part of an idling reduction campaign:

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4. Describe the target audience that your community would like to work with to reduce idling (e.g. schools, school buses, municipal fleets, mass transit stations, etc.):

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Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Diesel Vehicle Retrofit Equipment & Diesel Hybrid Trucks**  
**Municipal Sustainability Grant Application - FY 2009**

Name of Municipality \_\_\_\_\_

## A. Introduction

For more information about this grant item, please contact Richard Blanchet at 617-654-6585

As part of its Diesel Emissions Reduction Strategy, MassDEP is offering grants to retrofit certain municipally owned vehicles and offset diesel hybrid vehicle purchases. FY09 funding provides for retrofits of municipally owned, diesel *refuse or recycling collection* vehicles with retrofit devices such as diesel oxidation catalysts (DOCs) and diesel particulate filters (DPFs). DOCs reduce fine particulate matter (PM) emissions by at least 20 percent; DPFs reduce PM emissions by up to 90%.

New in FY09: Funding is available to support the purchase of *hybrid* heavy-duty diesel vehicles used in municipal operations. The grant will cover the cost differential between a conventional diesel vehicle and a hybrid diesel vehicle, which is approximately \$40,000 per vehicle.

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



## B. Diesel Refuse/Recycling Vehicle Retrofit Application

1. Please identify the municipal employee who will be the contact for this project, if funded.

a. Name \_\_\_\_\_

b. Title \_\_\_\_\_

c. Telephone \_\_\_\_\_

d. Email \_\_\_\_\_

2. Has your municipality installed retrofit equipment on any of its vehicles to date?

☐ a. Yes ☐ b. No

c. Explain \_\_\_\_\_

3. **Vehicle Information:** Provide the information requested below for the municipally owned diesel REFUSE or RECYCLING vehicle(s) that your municipality wishes to retrofit. MassDEP will give priority to high service vehicles and/or those with a remaining useful life of at least five (5) years. Please list vehicles in order of preference to be retrofitted, in descending order (i.e. first vehicle listed is your first choice to receive retrofit).

a.

1. Vehicle Make/Model Year \_\_\_\_\_

2. Engine Year \_\_\_\_\_

3. Vehicle Description (e.g. 30 Yard Refuse Packer) \_\_\_\_\_

4. Annual Hours or Miles Driven \_\_\_\_\_

5. VIN # \_\_\_\_\_

6. Fueling (Check One):

☐ a. Central

☐ b. Mobile

b.

1. Vehicle Make/Model Year \_\_\_\_\_

2. Engine Year \_\_\_\_\_

3. Vehicle Description (e.g. 30 Yard Refuse Packer) \_\_\_\_\_

4. Annual Hours or Miles Driven \_\_\_\_\_

5. VIN # \_\_\_\_\_

6. Fueling (Check One):

☐ a. Central

☐ b. Mobile

c.

1. Vehicle Make/Model Year \_\_\_\_\_

2. Engine Year \_\_\_\_\_

3. Vehicle Description (e.g. 30 Yard Refuse Packer) \_\_\_\_\_

4. Annual Hours or Miles Driven \_\_\_\_\_

5. VIN # \_\_\_\_\_

6. Fueling (Check One):

☐ a. Central

☐ b. Mobile



**Massachusetts Department of Environmental Protection**  
Bureau of Waste Prevention - Consumer Programs  
**Diesel Vehicle Retrofit Equipment & Diesel Hybrid Trucks**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

**B. Diesel Refuse/Recycling Vehicle Retrofit Application (continued)**

d.	_____ 1. Vehicle Make/Model Year	_____ 2. Engine Year
	_____ 3. Vehicle Description (e.g. 30 Yard Refuse Packer)	_____ 4. Annual Hours or Miles Driven
	_____ 5. VIN #	6. Fueling (Check One): <input type="checkbox"/> a. Central <input type="checkbox"/> b. Mobile
e.	_____ 1. Vehicle Make/Model Year	_____ 2. Engine Year
	_____ 3. Vehicle Description (e.g. 30 Yard Refuse Packer)	_____ 4. Annual Hours or Miles Driven
	_____ 5. VIN #	6. Fueling (Check One): <input type="checkbox"/> a. Central <input type="checkbox"/> b. Mobile
f.	_____ 1. Vehicle Make/Model Year	_____ 2. Engine Year
	_____ 3. Vehicle Description (e.g. 30 Yard Refuse Packer)	_____ 4. Annual Hours or Miles Driven
	_____ 5. VIN #	6. Fueling (Check One): <input type="checkbox"/> a. Central <input type="checkbox"/> b. Mobile
g.	_____ 1. Vehicle Make/Model Year	_____ 2. Engine Year
	_____ 3. Vehicle Description (e.g. 30 Yard Refuse Packer)	_____ 4. Annual Hours or Miles Driven
	_____ 5. VIN #	6. Fueling (Check One): <input type="checkbox"/> a. Central <input type="checkbox"/> b. Mobile
h.	_____ 1. Vehicle Make/Model Year	_____ 2. Engine Year
	_____ 3. Vehicle Description (e.g. 30 Yard Refuse Packer)	_____ 4. Annual Hours or Miles Driven
	_____ 5. VIN #	6. Fueling (Check One): <input type="checkbox"/> a. Central <input type="checkbox"/> b. Mobile

**C. Diesel Hybrid Vehicle Application**

To apply, your municipality grant must have: (1) appropriated funds in its FY2009 capital budget to purchase a Class 4-7 work truck or (2) have a capital replacement plan that calls for the purchase of the same vehicle type in FY2010.

1. Please identify the municipal employee who will be the contact for this project, if funded.

_____ a. Name	_____ b. Title
_____ c. Telephone	_____ d. Email

2. Has your municipality approved the purchase of one or more Class 4-7 work trucks in FY2009?

☐ a. Yes ☐ b. No – Skip to Question 4.

3. If yes, please list vehicle(s) you plan to purchase below.

a.	_____ 1. Vehicle Make/Model Year (if Known)	_____ 2. Anticipated Annual Use (Hours or Miles)
	_____ 3. Vehicle Class/Description	



**Massachusetts Department of Environmental Protection**  
Bureau of Waste Prevention - Consumer Programs  
**Diesel Vehicle Retrofit Equipment & Diesel Hybrid Trucks**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**C. Diesel Hybrid Vehicle Application** (continued)

b. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

c. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

d. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

4. Does your municipality have a capital improvement, equipment replacement, or similar long-term plan that includes a recommendation to purchase one or more class 4-7 work trucks in FY2010?  
☐ a. Yes ☐ b. No

5. If yes, please list vehicle(s) you plan to purchase below.

a. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

b. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

c. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description

d. \_\_\_\_\_  
1. Vehicle Make/Model Year (if Known) 2. Anticipated Annual Use (Hours or Miles)  
\_\_\_\_\_  
3. Vehicle Class/Description



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Mandatory Recycling Enforcement Coordinators**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

## A. Introduction

For more information regarding this grant item, please contact Stefan Malner at 617-348-4004

### *For municipalities & groups of municipalities with populations greater than 25,000*

This grant provides funding for a Recycling Enforcement Coordinator to assist municipalities in enforcing mandatory recycling in *curbside* recycling programs. Eligible applicants include a single municipality with a population of at least 25,000, or a group of municipalities with a collective population of at least 25,000. Funding will cover a full or part-time dedicated enforcement coordinator to conduct the following activities:

- Establish baseline residential recycling participation data.
- Develop an enforcement protocol
- Conduct education about the enforcement initiative
- Monitor collection routes, record non-compliant addresses, and distribute enforcement notices.
- Compile data and report on results of the enforcement initiative.

The grant provides up to \$15/hour, not to exceed \$50,000, for a **new** enforcement coordinator's salary over a period of 18-24 months. Funds *cannot* be used to pay for an existing coordinator's salary. A portion of grant funds may also be used for public education materials related to the enforcement program. Applicants able to provide matching funds and those serving large populations will receive priority. A contribution of 50 percent matching funds is required of all grant recipients in year 2.

A regional application must identify a *lead municipality* that will enter into a contract with MassDEP and accept funds provided, on behalf of the group.

## B. Applicant Information

1. Request for: ☐ a. Single Municipality ☐ b. Group of Municipalities

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



**Note:** If this is a group application, you must provide letters of support or an inter-municipal agreement demonstrating that the municipalities have agreed to work cooperatively to hire a recycling enforcement coordinator and share the responsibilities of the grant. If you are filing online via eDEP you will be prompted to upload this documentation prior to submitting the application. If you are submitting the application in hard copy please include supporting documentation.

2. Single Applicant or Lead Municipality:

a. Name of Municipality

b. Population

c. Contact Name

d. Title

e. Telephone Number (555) 555-5555

f. Email Address

Does this municipality have a mandatory recycling ordinance or bylaw in place? ☐ g. Yes ☐ h. No

3. Municipality #2:

a. Name of Municipality

b. Population

c. Contact Name

d. Title

e. Telephone Number (555) 555-5555

f. Email Address

Does this municipality have a mandatory recycling ordinance or bylaw in place? ☐ g. Yes ☐ h. No





**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Mandatory Recycling Enforcement Coordinators**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**B. Applicant Information** (continued)

4. Municipality #3:

\_\_\_\_\_  
a. Name of Municipality

\_\_\_\_\_  
b. Population

\_\_\_\_\_  
c. Contact Name

\_\_\_\_\_  
d. Title

\_\_\_\_\_  
e. Telephone Number (555) 555-5555

\_\_\_\_\_  
f. Email Address

Does this municipality have a mandatory recycling ordinance or bylaw in place? ☐ g. Yes ☐ h. No

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**C. Additional Information**

1. Amount of funding you are requesting from MassDEP:

a. Year One: \$ \_\_\_\_\_

b. Year Two: \$ \_\_\_\_\_

2. Amount of matching funds applicant can provide:

a. Year One: \$ \_\_\_\_\_

b. Year Two: \$ \_\_\_\_\_

3. Indicate in which municipality and department the enforcement coordinator's office would be located:

\_\_\_\_\_  
a. Municipality

\_\_\_\_\_  
b. Department

4. Name and title of person the coordinator would report to:

\_\_\_\_\_  
a. Name

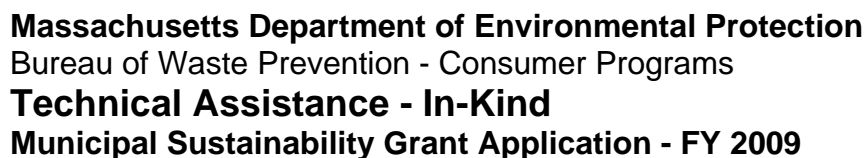
\_\_\_\_\_  
b. Title

5. Please describe how you will provide a workspace, computer, phone and email for the Enforcement Coordinator.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Please explain/discuss the goals and objectives you hope to achieve with this grant.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## A. Introduction

This grant is for communities seeking in-kind technical assistance (up to 80 hours) from one of MassDEP's Municipal Assistance Coordinators (MACs). MACs are available to assist communities on a wide range of waste reduction projects, including but not limited to:

- Waste reduction outreach and education
- Contracting for solid waste/recycling services
- Municipal solid waste program assessment and planning
- Implementation of recycling, composting, household hazardous waste or mercury collection programs

**Note:** Municipalities seeking technical assistance in evaluating or implementing a Pay-As-You-Throw solid waste program should complete the Pay-As-You-Throw Assistance Application. (To do so, return to the cover page of the grant application. In the items requested section, check Item C.)



## B. Applicant/Proposal Information

1. To be eligible for this grant, you must assign a municipal official with access to decision-makers to serve as a contact and coordinator for this project. Please identify that person below.

a. Municipality or Regional Group

b. Contact Name

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c. Title

d. Telephone Number (555) 555-5555

e. Email Address

2. Describe the project or program for which you are seeking assistance and how it will contribute to the advancement of waste reduction in your community:



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Technical Assistance - In-Kind**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

**B. Applicant/Proposal Information** (continued)

3. In addition to the person identified in question B.1. (above), please identify any other parties that will be involved in this project and the role each will play.

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4. Discuss any timing issues or other concerns that might impact the project.

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5. Indicate the number of hours of MAC assistance you are requesting (not to exceed 80): \_\_\_\_\_

Number of Hours

6. Discuss the timeline for this project and what you hope to accomplish by June 30, 2009.

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**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Technical Assistance - Municipal Sustainability Initiatives**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

For more information regarding this grant item, please contact Tina Klein at 617-292-5704

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## **A. Introduction**

Through the FY09 Technical Assistance Grant Program, MassDEP is soliciting proposals for local and regional initiatives that will help the Commonwealth meet its goals for reducing the volume and toxicity of the solid waste stream. Municipalities and regional groups with governmental status may apply for up to \$25,000 in funding for a 1-year project or \$50,000 for a 2-year project. The minimum grant request is \$10,000 per project.

The application requires a 3-4 page written proposal including budget and timeline. Grants will be awarded in the form of direct funding for eligible project expenses. Proposed projects should be completed by June 30, 2009 unless a 2-year project is being proposed. Funding for all projects is subject to FY09 appropriation.

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## **B. Who May Apply?**

**Applications will be accepted from the following entities:**

- Municipalities
- Regional government entities, such as solid waste management districts or cooperatives that have a government vendor number
- Non-governmental entities that have obtained a government entity (e.g. a city, town) to sponsor the application and whose proposal is of a direct benefit to the municipality. These organizations could include conservation districts, regional planning organizations, and non-profit organizations.

Partnerships among municipalities, public schools and school districts, non-profit organizations, businesses and municipal departments (e.g. boards of health, conservation commissions, etc) are encouraged.

**Individual Municipal Applications:** Municipalities and their departments, school districts, boards or commissions should submit ONE municipal application to MassDEP. This application may contain multiple technical assistance requests. If multiple technical assistance requests are submitted, the municipality should rank the requests in order of priority.

**Multiple Municipalities or Regional Applications:** Regional applications are strongly encouraged, when appropriate. Regional groups may include an ad-hoc association involving 2 or more municipalities, a formal relationship with a Memorandum of Understanding between several municipalities, or a solid waste or planning organization with governmental status. Regional proposals must be submitted by a single *lead municipality* on behalf of the group. The lead municipality will enter into a contract with MassDEP, will accept funds provided, and will be responsible for overseeing execution of the terms and scope of the contract. Please identify the lead municipality for your regional group in your proposals.

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## **C. What Types of Projects are Eligible for Funding?**

MassDEP is interested in funding projects that will reduce the volume and/or toxicity of the solid waste stream through composting, recycling and source reduction, mercury and hazardous waste diversion, and environmentally preferable products purchasing. These projects should be innovative, have value as a potential model for other communities, have quantifiable results, and promote regional public/private partnerships wherever possible.



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Technical Assistance - Municipal Sustainability Initiatives**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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**Eligible Projects Include, But Are Not Limited To:**

- Organics (food waste) diversion projects (e.g. commercial, residential, or school/institutional collection; development of processing capacity, or end market development);
- Strategies and initiatives to promote sustainable practices in schools, municipal operations and/or small to medium-sized businesses (e.g. recycling, composting, environmentally preferable purchasing, zero waste, etc);
- Implementation of new recycling collection and/or processing technologies (e.g. single stream or co-collection);
- Development of municipal guidelines, policies or contract requirements designed to leverage greater waste reduction in municipal operations or in the community at large.
- Diversion projects for “difficult to manage waste” (e.g. construction & demolition waste, building materials, etc);
- Innovative campaigns to increase participation in, or improve the effectiveness of, recycling, composting, and household hazardous waste programs;
- Innovative mercury collection programs serving residents and small businesses;
- Development of permanent, regional household hazardous waste collection facilities.

**BEFORE developing a proposal**, applicants are *strongly encouraged to speak with a MassDEP staff person* to discuss the eligibility of a specific project and provide general feedback on proposal concepts. Please contact Regan Clover at (617) 292-5707 and she will refer you to the appropriate staff person.

**Other Grants Offered:** For information on grants for municipal building energy audits and energy efficiency measures, smart growth, green schools and renewable energy installation projects offered through other Massachusetts state agencies, please refer to the *FY09 Municipal Grant Application Guidance* located at: <http://www.mass.gov/dep/recycle/recawgr.htm>

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**D. How May Grant Funds Be Used?**

Awarded funds may be used to hire a project coordinator, consultant, or intern to carry out project activities; conduct outreach; purchase equipment/supplies; or for certain operating costs for pilot programs only. Grant monies are provided on a reimbursement basis, therefore applicants must have the ability to pay for project costs up front and then be reimbursed by MassDEP. Funds may *not* be used for the daily management/operation of municipal programs (e.g. salaries, capital replacement costs). Funding will only be provided for pilot operating expenses that exceed normal operating costs. Pilot programs with potential for continuation beyond the pilot period will be viewed most favorably. All grant recipients must provide MassDEP with a detailed final report describing the accomplishments, barriers, costs, and lessons learned.

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**E. Evaluation Criteria**

Technical assistance proposals will be evaluated in two parts, as described below. After reviewing your proposal, MassDEP may ask you to provide additional information in order to evaluate the merits of the project.

**MassDEP Criteria** – 70 percent of the score will be assigned based on:

- The applicant’s ability to use the grant funds productively and within the specified timeframe
- The feasibility of the project as demonstrated in the proposal
- The innovativeness of the project.
- The environmental benefits relative to project cost
- The ability to measure or quantify the results of the project
- The project’s potential value as a model for other communities
- The likelihood the project will continue after funding ends



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Technical Assistance - Municipal Sustainability Initiatives**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

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## **E. Evaluation Criteria** (continued)

### **Commonwealth Capital Criteria:**

30 percent of the score will be derived from the applicant's *Commonwealth Capital Application* score. The Commonwealth Capital Program (CCP) is a system for rewarding municipalities that have adopted sustainable development principles. Points are assigned for certain planning, zoning, housing, environmental, energy, transportation and other measures that the applicant has implemented or has committed to implement by December 31, 2008. To complete the FY09 *Commonwealth Capital Application*, please contact Eric Hove, MA Executive Office of Energy and Environmental Affairs at 617-626-1131, email [Eric.hove@state.ma.us](mailto:Eric.hove@state.ma.us) or visit <http://www.mass.gov/dep/recycle/recawgr.htm> and click on Municipal Sustainability Grants.

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## **F. Proposal Submittal Requirements** (Please limit proposals to four pages.)

1. **Title:** Please assign your project a title consisting of 8 words or less.
2. **Brief Project Description:** Describe the project you are proposing in general terms (one paragraph maximum) and the amount of MassDEP funds that you are requesting.
3. **Goals and Objectives:** Identify the project goals and objectives and the reason why this grant is important to your community (communities). Discuss any challenges or barriers you are attempting to overcome, and what benefits the project will provide to your municipality or the region.
4. **Deliverables:** Identify the *key milestones* and *tasks* to be accomplished. Be as specific as possible about the steps that you are proposing. Note: All funded projects must provide MassDEP with a detailed final report describing the accomplishments, barriers, costs and lessons learned. Please keep this in mind when developing your timeline and budget.
5. **Timeline:** Provide a timeline identifying when specific tasks will be completed. If the project scope is small enough to complete within 6-8 months from the date of award, then the project will be treated as a FY2009 project and all work must be completed by June 30, 2009. *Projects that require multiple years of funding should include yearly goals, deliverables and budgets.*
6. **Project Evaluation:** Describe how you will evaluate or measure the success of the proposed project. If appropriate, discuss baseline data available and data collection methodologies.
7. **Budget:** State clearly the amount of funds you are requesting from MassDEP for this project and include a detailed project budget. The budget should identify the items or services for which you are requesting funding, including equipment, outreach materials, coordinator or consultant costs, etc.) Also include any matching funds (hard match or in-kind services/existing staff) that will be used for this project and estimate the value of in-kind services to the best of your ability.
8. **Resources:** Identify the municipal staff person who will serve as the project coordinator and other key personnel such as consultants or subcontractors that will be involved. Provide a statement of qualifications or resumes for key people implementing the tasks as appropriate.
9. **Letters of Support or Interest:** To the extent that other municipalities or partner organizations are involved in the project, please attach letters of support.

*NOTE: Resumes and letters of support are **not** included in the four-page proposal limit.*

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## **G. Applicant Information**

To apply for a technical assistance grant(s), please complete the information below, prepare a written proposal in Microsoft Word (four pages maximum) that includes all elements of the Proposal Submittal Requirements.

1. ☐ Please check here *if you are submitting more than one proposal* and complete the requested information for each project below. (Note: Proposal #1 will be considered the highest priority)
2. ☐ I have reviewed the technical assistance evaluation criteria and proposal submittal requirements.



**Massachusetts Department of Environmental Protection**  
**Bureau of Waste Prevention - Consumer Programs**  
**Technical Assistance - Municipal Sustainability Initiatives**  
**Municipal Sustainability Grant Application - FY 2009**

\_\_\_\_\_  
Name of Municipality

## H. Proposal Information

**Important:**

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



**Proposal #1:**

\_\_\_\_\_  
a. Project Title (8 words or less)

\_\_\_\_\_  
b. Contact Name

\_\_\_\_\_  
c. Title

\_\_\_\_\_  
d. Telephone Number (555) 555-5555

\_\_\_\_\_  
e. E-mail Address

\_\_\_\_\_  
f. Dollar Amount of Grant Request

**Proposal #2:**

\_\_\_\_\_  
a. Project Title (8 words or less)

\_\_\_\_\_  
b. Contact Name

\_\_\_\_\_  
c. Title

\_\_\_\_\_  
d. Telephone Number (555) 555-5555

\_\_\_\_\_  
e. E-mail Address

\_\_\_\_\_  
f. Dollar Amount of Grant Request

## I. Additional Information

1. Is this a regional group application? ☐ Yes ☐ No
2. Important: In addition to requested funding, are you interested in receiving in-kind assistance (i.e. a specified number of hours from a DEP Municipal Assistance Coordinator) to implement your project?  
☐ a. Yes – estimate number of hours needed \_\_\_\_\_ b. Number of Hours Needed \_\_\_\_\_  
☐ c. No – I am not requesting in-kind assistance
3. How will you be submitting the written proposal?  
☐ a. I will be attaching my written proposal to my eDEP online submittal  
(Deadline: Received by September 11, 2008, 11:59 pm)  
☐ b. I will be *mailing* my written proposal separately to MassDEP.  
(Deadline: Received by September 11, 2008, 5:00 pm)  
☐ c. I will be submitting my written proposal *via email*, to [DEP.MunicipalGrants@state.ma.us](mailto:DEP.MunicipalGrants@state.ma.us)  
(Deadline: Received by September 11, 2008, 11:59 pm)

**Submit written proposals for this item to:**

Tina Klein, Grant Manager  
MassDEP  
1 Winter Street, 6<sup>th</sup> floor  
Boston, MA 02108



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention - Consumer Programs  
**Municipal Sustainability Grant Priority Ranking**  
**Equipment, Outreach & Technical Assistance - FY 2009**

\_\_\_\_\_  
Municipality

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



## A. Priority Ranking

1. Please prioritize **ONLY** the items you have requested (e.g., 1 = first choice, 2 = second choice, etc.):

Items	Rank Priority
a. Public Area Recycling Containers	_____
b. Consumer Education and Outreach Materials	_____
c. Pay-As-You-Throw Program Assistance	_____
d. Home Composting Bins/Kitchen Scrap Buckets	_____
e. Rain Barrels and Water Conservation Kits	_____
f. School Chemical Management/Cleanout	_____
g. Mercury/Universal Waste Shed	_____
h. Idling Reduction Campaign Toolkit	_____
i. Diesel Vehicle Retrofits and Diesel Hybrid Trucks	_____
j. Mandatory Recycling Enforcement Coordinator	_____
k. Technical Assistance: In-Kind	_____
l. Technical Assistance: Municipal Sustainability Initiatives	_____

## B. Certification

1. ☐ Our municipality has made a Buy Recycled commitment by adopting an ordinance, by-law or policy to buy products made of recycled content in lieu of virgin products (when recycled products are readily available, of comparable quality and cost competitive).
2. ☐ Our municipality has a CY2007 Recycling Data Sheet on file with MassDEP **or**
3. ☐ We intend to submit a Data Sheet by the grant deadline.

"I am the municipal official with authority to apply for and accept state grants, and I certify that the information provided here is accurate to the best of my knowledge."

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date (MM/DD/YYYY)